

Attachment 1

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF OCEAN ENERGY MANAGEMENT

Atlantic OCS Region
(Insert Appropriate Regional Office)

GO	M OCS REGION, BOEM
	MAY 2 9 2018
RE	New Orleans, LA SOURCE EVALUATION

APPLICATION FOR PERMIT TO CONDUCT GEOLOGICAL OR GEOPHYSICAL EXPLORATION FOR MINERAL RESOURCES OR SCIENTIFIC RESEARCH ON THE OUTER CONTINENTAL SHELF

(Section 11, Outer Continental Shelf Lands Act of August 7, 1953, as amended on September 18, 1978, by Public Law 95-372, 92 Statute 629, 43 U.S.C. 1340; and 30 CFR Parts 551 and 251)

TDI Brooks International, Inc.
Name of Applicant
14391 South Dowling Road
Number and Street
College Station, TX 77845
City, State, and Zip Code
Application is made for the following activity: (check one)
XGeological exploration for mineral resources
Geological scientific research
Geophysical exploration for mineral resources
Geophysical scientific research
Submit: Original plus three copies, totaling four copies, which include one digital copy, and one public information copy.
To be completed by BOEM
Permit Number: <u>E18-002</u> Date: <u>29-May-2018</u>

A. General Information

1.	The activity will be conducted by:			
	TDI-Brooks International, Inc.	For	TGS	
	Service Company Name	1 01_	Purchaser(s) of the Data	
	14391 S Dowling Rd		10451 Clay Road	
	Address		Address	
	College Station, TX 77845	City, State, Zi 713-860-2100 Telephone/FA	Houston, TX 77041	
	City, State, Zip		City, State, Zip	
	979-693-3446		713-860-2100	
	Telephone/FAX Numbers		Telephone/FAX Numbers	
	drjmbrooks@aol.com		asif.ali@tgs.com	ottom sheets as
	E-Mail Address		E-Mail Address	
2.	The purpose of the activity is:	M	ineral exploration	
		Sc	ientific research	
	measures). For example: 1) Potential Effer Protected Species Observers (PSO's), man disturbance; Mitigation: ROV deployment necessary or provide a separate attachment Acquisition of 6m and 18m piston of	mmal e: t/retriev nt):	sclusion zone or 2) Potential Effect: Botto al of bottom nodes) (use continuation she	
	stratigraphic / geologic studies and			
-	stratigraphic r geologic studies and	ı Dasıı	modelling. No adverse impacts.	
ŀ.	The expected commencement date is: Se	ptemb	per 2018	
	The expected completion date is: Decer	mber 2	2018	
i.	The name of the individual(s) in charge of Dr. Peter Hitchcock	f the fie	d operation is:	
	May be contacted at: TDI-Brooks International, Inc.			
	Telephone (Local) 979-693-3446		(Marine) 979-314-4369	
	Email Address: peterhitchcock@tdi-b	oi.com		

	6.	The vessel(s) to be used in the operation is (are):					
		Vessel Name (s) RV Brooks McCall	Registry Number(s) 338257000	Radio Call Sign(s) wcz7811	Registered Owner(s) OMA McCall Inc		
	7.	The port from which the ve	essel(s) will operate is:				
	8.	Briefly describe the naviga	tion system (vessel nav	rigation only):			
		Furuno GPS / heading	g system				
В.		omplete for Geologica eological Scientific Re	•	Mineral Resources	s or		
	1.	The type of operation(s) to	be employed is: (chec	ck one)			
		a Deep stra	tigraphic test, or				
		b Shallow	stratigraphic test with p	proposed total depth of	, or		
		c. X Other pis	ston coring and sur	face heat flow mea	surements		
	2.	Attach a page-size plat sho appropriate, a polygon enc coastline; point of reference Activity; 4) Label as "Publ	losing the test sites may	y be used, 2) BOEM p	rotraction areas;		
		See attached figure					
C.	Co Ge	omplete for Geophysic eophysical Scientific I	cal Exploration fo Research	r Mineral Resourc	es or		
	1.	The proposed operation: _a. Acquisition method (Olb. Type of acquisition: (FCSEM, etc.)	BN, OBC, Streamer):				
	2.	Attach a page-size plat shoa. The generalized proposts. BOEM protraction area. Distance and direction d. Label as "Public Information and the statement of the	sed location of the active as; coastline; point of re from a point of referen	eference,			

*		
	es will will notbe used.	
Explosive and maxim	num charge size (in pounds) to be	used:
Type	Pounds	Equivalent Pounds of TNT
Proprietary Infor	rmation Attachments	
Use the appropriate for	form on page 9 for a "geological" r	permit application or the form on page 11 for a
	application. You must submit a s	eparate Form BOEM-0327 to apply for each
Certification		
I hereby certify that f	foregoing and attached information	are true and correct.
Print Name: Dr. Jar	mes M. Brooks	
SIGNED 9-141	Burk	DATE 05-23-18
TITLE President,	CEO	
COMPANY NAME	: TDI-Brooks International,	nc.
COMPANT NAME		no.
	TO BE COMPLETED	BY BOEM
mit No.	702 Assigned by / land	of BOEM Date 24-Jul-
s application is herel	by:	
a. Accepted		
b Returned	for reasons in the attached	

Form BOEM-0327 (February 2015) Previous Editions are Obsolete.

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